

OFFICE OF THE CHIEF OF POLICE

SPECIAL ORDER NO. 15

April 11, 2008

SUBJECT: EQUIPMENT BUDGET REQUEST, FORM 01.91.00 - REVISED; DEACTIVATION OF EXPENSE BUDGET REQUEST, FORM 01.91.01, PACKAGE REQUEST EXPENSE AND EQUIPMENT SUPPORT ITEMS, FORM 01.91.02, AND CAPITAL PROJECT OR ALTERATION AND IMPROVEMENT BUDGET REQUEST, FORM 01.91.04

PURPOSE: A review of forms used by Fiscal Operations Division identified the need for several updates. This Order renames the Equipment Budget Request, Form 01.91.00, and deactivates the Expense Budget Request, Form 01.91.01, Package Request Expense and Equipment Support Items, Form 01.91.02, and the Capital Project or Alteration and Improvement Budget Request, Form 01.91.04.

PROCEDURE:

I. EQUIPMENT BUDGET REQUEST - RENAMED AND REVISED. In the past, separate forms were used for requesting expense budget items and equipment budget items. The Equipment Budget Request and the Expense Budget Request have now been combined to create a single form that facilitates both equipment and expense requests. The new form is called the Equipment/Expense Budget Request, Form 01.91.00.

A. Use of Form. The use of this form remains unchanged.

B. Completion. Completion of this form is self-explanatory.

C. Distribution. The Equipment/Expense Budget Request distribution is as follows:

3 - Original and two copies, to concerned bureau commanding officer. (Bureau commanding officer shall forward original and two copies of approved requests to the Budget and Revenue Section, Fiscal Operations Division.)

1 - Division of origin.

4 - **TOTAL**

II. THE EXPENSE BUDGET REQUEST, THE PACKAGE REQUEST EXPENSE AND EQUIPMENT SUPPORT ITEMS, AND THE CAPITAL PROJECT OR ALTERATION IMPROVEMENT BUDGET REQUEST - DEACTIVATED. The Expense Budget Request has been deactivated and replaced by the Equipment/Expense Budget Request. All deactivated forms shall be marked "obsolete" and placed in a divisional recycle bin.

Note: The Capital Project or Alteration and Improvement Budget Request has been superceded by a City form: Alteration and Improvement Request, CAO 42.

FORM AVAILABILITY: The Equipment/Expense Budget Request and the Alteration and Improvement Request forms are available in LAPD Forms on the Department's Local Area Network. A copy of each form is attached for duplication and immediate use.

AMENDMENTS: This Order amends Section 5/1.91.00 and deletes Sections 5/1.91.01, 5/1.91.02, and 5/1.91.04 of the Department Manual.

AUDIT RESPONSIBILITY: The Commanding Officer, Fiscal Operations Division, shall monitor compliance with this directive in accordance with Department Manual Section 0/080.30.



WILLIAM J. BRATTON
Chief of Police

Attachments

DISTRIBUTION "D"

EQUIPMENT/EXPENSE BUDGET REQUEST

						FOD USE ONLY	
1. DIVISION PRIORITY NO.	2. BLANKET REQUEST		3. EQUIPMENT <input type="checkbox"/>	EXPENSE <input type="checkbox"/>	PACKAGE NUMBER		SERIAL NUMBER
4. BUREAU		5. IS THIS A PACKAGE REQUEST? YES <input type="checkbox"/> NO <input type="checkbox"/>					
6. DIVISION/AREA		7. NEW <input type="checkbox"/>	REPLACEMENT <input type="checkbox"/>	8. IS THIS AN ANNUAL RECURRING ITEM? YES <input type="checkbox"/> NO <input type="checkbox"/>			
9. QUANTITY AND DETAILED DESCRIPTION OF REQUESTED ITEM (TRAVEL, DUES, OFFICE SUPPLIES, ETC.)							
10. JUSTIFICATION FOR REQUEST (HOW WILL THE DEPARTMENT'S OBJECTIVE BE ACHIEVED?)							
				11. COMMANDING OFFICER			
IF ADDITIONAL SPACE IS REQUIRED, USE CONTINUATION SHEET							

REQUEST EVALUATION

12. BUREAU COMMANDING OFFICER	
13. OFFICE DIRECTOR	

FOD USE ONLY

INVESTIGATOR	REPORT ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO	INVESTIGATOR'S RECOMMENDATION

City of Los Angeles

ALTERATION AND IMPROVEMENT REQUEST

Department	Bureau or Division	Building No.	Street Address
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Departmental Priority No.	For CAO Use Only	Est. Cost - Dept. of General Services
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Description of Alteration and Improvement (attach sketch or plan if necessary):

[Large empty box for sketch or plan]

Justification for Alteration and Improvement (in detail):

[Large empty box for justification]

(use additional sheets if necessary)

Departmental Liaison		Approved by:
Name	Ext.	
Requested by:		Head of Department
General Manager, Bureau/Division Head		Date: _____

Justification for Alteration and Improvement (in detail) - continued.